Approved for use through 7/31/2005 OMP accident

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						ce; U.S. DEPARTMENT OF COMMERCE ss it displays a valid OMB control number. Application or Gocket Namber		
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY						OTHER THAN SMALL ENTITY		
FOR	NUMBER FILED	NUMBER EXTRA.	BATE (6)					\dashv
BASIC FEE (37 CFR 1.16(a), (b), or (c))			RATE (\$)	FEE (S	77	RATE (S)	FEE (1)	\downarrow
SEARCH FEE			┨┠╌┈	27.5	vq		11900	\mathcal{M}
(37 CFR 1.18(k), (i), or (m)) EXAMINATION FEE (37 CFR 1.18(o), (p), or (q))			┨┝──		4			
TOTAL CLAIMS			1-00		4			
37 CFR 1.16(I)) NDEPENDENT CLAIMS	minus 20 =	·	1 1/2/5		OR	1× 50 =		1
37 CFR 1.16(h))	minus 3 =		x/00 :	.	7	200	1.	┥.
APPLICATION SIZE FEE 37 CFR 1.16(s))	If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a	plication size fee due entity) for each fraction thereof. See und 37 CFR 1.16(s).						
MULTIPLE DEPENDENT (LAIM PRESENT (37 CFR 1.	16())	F	1.	7			\dashv
.lf.the.difference in column	1. is less than zero, enter. "O"		, L	 	-{	L		4
	TONAS AMENDED -		TOTAL	<u> </u>	<u></u>]	·TOTAL		
C REI	LAIMS HIS	GHEST PRESENT	S'MALL RATE (\$)	ENTITY	OR	SMALL	R THAN ENTITY	-
AME	FIER	VIOUSLYEXTRA	10012(3)	ADDI- TIONAL FEE (\$)	<u> </u>	RATE (S)	ADDI- TIONAL FEE (\$)	
(17 CFR 1.16(i))	Minus	9	35		OR.	× 50 :		1
(37 CFR 1,16(a))	3	3	×100 =		7	,200		1
Application Size Fee (37 CFR 1.16(s))		7.00		OR	ACCO:		-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16())		180		OR	360		1	
			TOTAL ADD'L FEE		OR	TOTAL		1
(Coli	.mn 1) (Co	olumn 2) (Column 3)	٨٥٥٤،٤٤		_ ~ L	ADD'L FEE		1
CL CL	AIMS HIG	HEST	<u> </u>		ר .			1
AI AMEN	TER PREV	MBER PRESENT IOUSLY EXTRA	- RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (S)	ADDI- TIONAL	
Total (37 CFR 1.16(i)) Independent	Minus "	34	25.		OR	. 50 .	FEE (S)	
(37 OFR 1.15(N)) Application Size Fee (3)	7 CFR 1.16(s))	3 -	×/00=		OR	×200 =		
EIRST PRESENTATION O	180		-0R-	360				
			TOTAL ADD L FEE		OR L	TOTAL ADD'L FEE		
* If the entry in column 1 if the "Highest Number I	is less than the entry in colum Previously Paid For IN THIS	nn 2, write "0" in column 3.	L					

"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

The 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) en application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.